

Docket No. 0575/51917-CB-PCT-USIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): David J. Pinsky, et al.  
Serial No. : 10/692,439 Examiner: M. Szperka  
Filed : October 22, 2003 Group Art Unit: 1644  
For : Methods for Treating Ischemic Disorder and Improving Stroke Outcome

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: May 17, 2007

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

\_\_\_\_\_ A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	1 -	* 20 =	*** 0 X	\$25	\$50	=	0	
Indepen- -dent Claims	1 -	** 6 =	*** 0 X	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time Yes <u>X</u> No				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE			\$ 0.00	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter

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The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter

☒ Return Receipt Postcard

☐ An Information Disclosure Statement, including Form PTO-1449

(Copies of citations included: Yes ☐ No ☐  
and a fee of \$ ☐ included)

☒ A Petition for an Extension of Time, including a fee of  
\$ 510.00 for a Petition for 3 Month(s) Extension of Time

☐ Other (identify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE TOTAL FEE DUE IS \$ 510.00.

☒ A check in the amount of \$ 510.00 is enclosed.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of  
\$ \_\_\_\_\_.

☒ The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:

☒ Fees under 37 C.F.R. §1.16 for the presentation of extra claims  
☐ Patent application processing fees under 37 C.F.R. §1.17

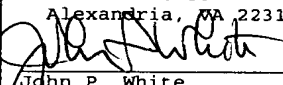
Respectfully submitted,



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I hereby certify that this  
correspondence is being deposited this  
date with the U.S. Postal Service with  
sufficient postage as first class mail  
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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450.

  
John P. White  
Reg. No. 28,678

5/17/07  
Date